STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

IAN 3 0 2019

I. Name of Lobbyist	(s) James J. Bianco, J	r · Kathy Corey	Fox		JAN 50 2010	
	's partnership, firm or c				NEW HAMPSHIRE DEPARTMENT OF STAT	Œ
•	•			}	DEFAILT	
	inco Professional Ass me of partnership, firm or co				•	
					0000	
	tre Street	Concord	NH		(Zin Code)	
•	treet)	(Town/City)	(State)		(Zip Code)	
(603) 225-7170	(603)	226-0165	e-mail _att	ys@biance	opa.com	
(Telephone)		(Fax)				
reportable expense t	overs: (Choose one – file ransactions which are n assactions occurring in the	ot attributable to	any one client).			
An reportable trai	NH Dental Socie		creporting date relativ	. e .o uic (011	<u></u>	
	(Full Name of Client as is	· _	yist Registration Form)			
<u>OR</u>						
All reportable trai unrelated to any parti-	nsactions by the lobbyist cular client.	(including the lobby	yist's family), or the l	obbying firn	n listed below which are	
IV. Date of Report Reports cover: acti	April 25, 2018 vity from date of registratio	n to 3/31/18	July 25, 2018 activity from 4/1/18 to			
	October 31, 2018 activity from 7/1/18 to 9/36		January 30, 20 activity from 10/1/18 t	119 🔀 10 12/31/18		
V. There have bee If this box is checked. Concord, NH 03301.	n no fees received and complete just this form o	I no reportable to and submit it to the	ransactions made s Secretary of State's C	since the la Office, State I	nst report. House, Room 204,	
VI. Check if addition	nal reports are attached	:				
	ved fees or made expendi		: Addendum A– Fees	s and Expens	ses	
☐ If you have paid Expense Reimbursen	an honorarium or reimbu	rsed expenses, you	must file Addendum	B– Report o	of Honorariums or	
	, or your family has made	political contributi	ions, you must file Ac	dendum C	- Political Contributions	
I have read RSA 15.	ffirmation by Lobbyist RSA 15-B. RSA 14-C an best of my knowledge and		eby swear or affirm th	hat the foreg	oing information is true	
·	1/1/		January 30	2019		
(Signature of lobbyi	$\frac{1}{\text{st}}$		_ January St	(Date)	_ _	
	//					
James J. Bianco						
(Print Name of lobb	yist)					

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STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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	NEW HAMPSH DEPARTMENT OF
t. Name of Lobbyist(s) James J. Bianco, Jr., Kathy Corey Fox	DEPARTMENT OF
II. Name of lobbyist's partnership, firm or corporation, if any:	
Bianco Professional Association	
(Name of partnership, firm or corporation)	
III. Name of Client NH Dental Society	Date1/30/2019
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 1,500
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 48,827 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 50,327
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 1,500
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 1,500
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 45,160
f) Total of all expenses year to date	n \$46,660
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from beginning by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the foregoing information
	1/30/2019
(Signature of lobbyist)	(Date)
James J. Bianco, Jr.	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:



Name of Lobbying partr	ership, firm, or corpo	oration: Bianco Profess	ional Association	_
Name of Client (leave b	lank if Statement is fo	or the partnership, firm, or	corporation and not related to a	ny
particular client): NH	Dental Society			_
·				
Date of Report (check o	ne):			
April 25, 2018 🗆	July 25, 2018 [™]	October 31, 2018 🗆	January 30, 2019 🛚	
			nd Expenses described above, a umber of Addendum forms bei	
Addendum A(s)				
Addendum B(s)				
Addendum C(s)				
I hereby swear or affirm complete to the best of r	• •		nt and each Addendum is true a	nd
Kritis	lower for	Jar	nuary 30, 2019	
(Signature of lobbyist)	- q-		(Date)	
Kathy Corey Fox				
(Print Name of lobbyist)	•			